

FEC
FORM 3

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED

2014 APR 15 AM 10:57

Office Use Only

FEC MAIL CENTER

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

MARK GULLIVAN FOR CONGRESS

ADDRESS (number and street)

PO BOX 173

Check if different
than previously
reported. (ACC)

DONIPHAN

NE

68832-0173

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00517011

3. IS THIS
REPORT

X

NEW
(N)

OR

AMENDED
(A)

NE

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

X

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

M M / D D / Y Y Y Y

Election on

in the
State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

M M / D D / Y Y Y Y

Election on

in the
State of

5. Covering Period

01' 01' 2014

through

03' 31' 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Paul E Sullivan

Signature of Treasurer

Paul E Sullivan

Date

04' 14' 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

MARK SULLIVAN FOR CONGRESS

Report Covering the Period:

From:

01 ^M' ^D01 ^Y' ^Y2014

To:

03 ^M' ^D31 ^Y' ^Y2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	, 14,909. ⁸³ / ₁₀₀	, 35,625. ⁴⁵ / ₁₀₀
(b) Total Contribution Refunds (from Line 20(d))	, , . ⁰⁰ / ₁₀₀	, , . ⁰⁰ / ₁₀₀
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	, 14,909. ⁸³ / ₁₀₀	, 35,625. ⁴⁵ / ₁₀₀
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	, 1,878. ⁵⁴ / ₁₀₀	, 19,017. ¹⁰ / ₁₀₀
(b) Total Offsets to Operating Expenditures (from Line 14)	, , . ⁰⁰ / ₁₀₀	, , . ⁰⁰ / ₁₀₀
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	, 1,878. ⁵⁴ / ₁₀₀	, 19,017. ¹⁰ / ₁₀₀
8. Cash on Hand at Close of Reporting Period (from Line 27)	, 19,360. ³⁰ / ₁₀₀	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	, , . ⁰⁰ / ₁₀₀	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	, 2,500. ⁰⁰ / ₁₀₀	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

MARK SULLIVAN FOR CONGRESS

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} **01 / 01 / 2014** To: ^{M M / D D / Y Y Y Y} **03 / 31 / 2014**

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

11,744.⁰⁶/₁₀₀

12,944.⁰⁶/₁₀₀

(ii) Unitemized.....

2,145.⁷⁷/₁₀₀

8,215.⁴¹/₁₀₀

(iii) TOTAL of contributions from individuals ▶

13,909.⁸³/₁₀₀

21,159.⁴⁷/₁₀₀

(b) Political Party Committees.....

2,000.⁰⁰/₁₀₀

4,000.⁰⁰/₁₀₀

(c) Other Political Committees (such as PACs).....

00.⁰⁰/₁₀₀

00.⁰⁰/₁₀₀

(d) The Candidate.....

00.⁰⁰/₁₀₀

9,465.⁹⁸/₁₀₀

(e) TOTAL CONTRIBUTIONS (other than loans)

16,909.⁸³/₁₀₀

35,625.⁴⁵/₁₀₀

(add Lines 11(a)(iii), (b), (c), and (d))..

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

00.⁰⁰/₁₀₀

00.⁰⁰/₁₀₀

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

00.⁰⁰/₁₀₀

2,500.⁰⁰/₁₀₀

(b) All Other Loans.....

00.⁰⁰/₁₀₀

00.⁰⁰/₁₀₀

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

00.⁰⁰/₁₀₀

2,500.⁰⁰/₁₀₀

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

00.⁰⁰/₁₀₀

00.⁰⁰/₁₀₀

15. OTHER RECEIPTS (Dividends, Interest, etc.)

00.⁰⁰/₁₀₀

00.⁰⁰/₁₀₀

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

16,909.⁸³/₁₀₀

39,125.⁴⁵/₁₀₀

14031213791

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	1,878. ⁵⁴ / ₁₀₀	19,017. ¹⁰ / ₁₀₀
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	00/ ₁₀₀	00/ ₁₀₀
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	00/ ₁₀₀	00/ ₁₀₀
(b) Of All Other Loans	1,000. ⁰⁰ / ₁₀₀	1,000. ⁰⁰ / ₁₀₀
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	1,000. ⁰⁰ / ₁₀₀	1,000. ⁰⁰ / ₁₀₀
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	00/ ₁₀₀	00/ ₁₀₀
(b) Political Party Committees.....	00/ ₁₀₀	00/ ₁₀₀
(c) Other Political Committees (such as PACs)	00/ ₁₀₀	00/ ₁₀₀
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	00/ ₁₀₀	00/ ₁₀₀
21. OTHER DISBURSEMENTS.....	00/ ₁₀₀	00/ ₁₀₀
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2,878. ⁵⁴ / ₁₀₀	20,017. ¹⁰ / ₁₀₀

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5,329. ⁰¹ / ₁₀₀
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	16,909. ⁸³ / ₁₀₀
25. SUBTOTAL (add Line 23 and Line 24).....	22,238. ⁸⁴ / ₁₀₀
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2,878. ⁵⁴ / ₁₀₀
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	19,360. ³⁰ / ₁₀₀

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 4

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MARK SULLIVAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. **Brown, Tom**

Mailing Address

4224 North Sand Road

City

Hershey

State

NE

Zip Code

69143

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

retired

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

2,500.00

Date of Receipt

03 07 2014

Amount of Each Receipt this Period

2,500.00

Full Name (Last, First, Middle Initial)

B. **Brown, Ruth**

Mailing Address

4224 North Sand Road

City

Hershey

State

NE

Zip Code

69143

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

retired

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

2,500.00

Date of Receipt

03 07 2014

Amount of Each Receipt this Period

2,500.00

Full Name (Last, First, Middle Initial)

C. **Brown, Tom**

Mailing Address

4224 North Sand Road

City

Hershey

State

NE

Zip Code

69143

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

retired

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

2,500.00

Date of Receipt

03 17 2014

Amount of Each Receipt this Period

2,500.00

SUBTOTAL of Receipts This Page (optional).....

7,500.00

TOTAL This Period (last page this line number only).....

14031213793

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 4

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

MARK SULLIVAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Brown, Ruth

Mailing Address

4224 North Sand Road

City

Hershey

State

NE

Zip Code

69143

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

retired

Receipt For:

☐ Primary
☒ General
☐ Other (specify)

Election Cycle-to-Date

2,500.00

Date of Receipt

03 / 17 / 2014

Amount of Each Receipt this Period

2,500.00

Full Name (Last, First, Middle Initial)

B. Engel, Chris

Mailing Address

1619 E Schultz Rd

City

Doniphan

State

NE

Zip Code

68832

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

farmer

Receipt For:

☒ Primary
☐ General
☐ Other (specify)

Election Cycle-to-Date

1,000.00

Date of Receipt

03 / 31 / 2014

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

C. Kasson, Norman & Pat

Mailing Address

9009 Canal Road

City

North Platte

State

NE

Zip Code

69101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

retired

Receipt For:

☒ Primary
☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

03 / 17 / 2014

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

3,800.00

TOTAL This Period (last page this line number only)

14031213794

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 4

11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

MARK SULLIVAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. **Kerry for US Senate**

Mailing Address

7602 Pacific St, Suite LL103

City **Omaha** State **NE** Zip Code **68114**

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

, **2,000.00**

Date of Receipt

01'13'2014

Amount of Each Receipt this Period

, **2,000.00**

Full Name (Last, First, Middle Initial)

B. **Stalcken Jim & Peg**

Mailing Address

11125 S Shady Bend Rd

City **Doniphan** State **NE** Zip Code **68832**

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

retired

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

, **300.00**

Date of Receipt

01'10'2014

Amount of Each Receipt this Period

, **300.00**

Full Name (Last, First, Middle Initial)

C. **Provinee, Deena**

Mailing Address

223 North 9th Ave

City **Broken Bow** State **NE** Zip Code **68822**

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Holcomb Pharmacy pharmacy tech

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

, **288.12**

Date of Receipt

03'19'2014

Amount of Each Receipt this Period

, **48.02**

X 3

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

14031213795

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 4 OF 4

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

MARK SULLIVAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Nebraska Democratic Party

Mailing Address

421 South 9th Street Suite 233

City

State

Zip Code

Lincoln

NE

68508

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

1,000.00

Date of Receipt

03 / 01 / 2014

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

14031213796

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE / OF /

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MARK SULLIVAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. **Nebraska Democratic Party**

Mailing Address

421 South 9th Street, Suite 233

City

State

Zip Code

Lincoln

NE

68508

Purpose of Disbursement

Van. Program

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify)

State:

District:

Date of Disbursement

03 / 01 / 2014

Amount of Each Disbursement this Period

, 1,000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

, , .

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

, , .

SUBTOTAL of Disbursements This Page (optional).....

, , .

TOTAL This Period (last page this line number only).....

, , .

14031213797

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE OF

FOR LINE NUMBER:
(check only one)

13a

13b

NAME OF COMMITTEE (In Full)

MARK SULLIVAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Election:

☐ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y M M / D D / Y Y Y Y

% (apr)

☐ Yes

☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

SUBTOTALS This Period This Page (optional)..... ►

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for
Information found on
Page ____ of Schedule C

NAME OF COMMITTEE (In Full) MARK SULLIVAN FOR CONGRESS		FEC IDENTIFICATION NUMBER C 00517011	
LENDING INSTITUTION (LENDER) Full Name		Amount of Loan Interest Rate (APR) %	
Mailing Address		Date Incurred or Established M M / D D / Y Y Y Y	
City State Zip Code		Date Due M M / D D / Y Y Y Y	
A. Has loan been restructured? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred M M / D D / Y Y Y Y			
B. If line of credit, Amount of this Draw: , , Total Outstanding Balance: , ,			
C. Are other parties secondarily liable for the debt incurred? <input type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify:			What is the value of this collateral? Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input type="checkbox"/> Yes
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify:			What is the estimated value? , ,
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: M M / D D / Y Y Y Y		Location of account: Address: City, State, Zip:	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE M M / D D / Y Y Y Y	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE M M / D D / Y Y Y Y	
Title			

14031213799

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE / OF

FOR LINE NUMBER:
(check only one)

9
10

NAME OF COMMITTEE (In Full)

MARK SULLIVAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mark Sullivan

Nature of Debt (Purpose):

Candidate Loan

Mailing Address

905 Hwy 2

City State

Doniphan NE

Zip Code

68832

Outstanding Balance Beginning This Period

, 2,500.00

Amount Incurred This Period

, , .00

Payment This Period

, , .00

Outstanding Balance at Close of This Period

, 2,500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nebraska Democratic Party

Nature of Debt (Purpose):

Mailing Address

City State

Lincoln NE

Zip Code

68

Outstanding Balance Beginning This Period

, 1,000.00

Amount Incurred This Period

, , .00

Payment This Period

, 1,000.00

Outstanding Balance at Close of This Period

, , .00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

, , .

Amount Incurred This Period

, , .

Payment This Period

, , .

Outstanding Balance at Close of This Period

, , .

1) SUBTOTALS This Period This Page (optional) ▶

, , .

2) TOTALS This Period (last page this line number only) ▶

, , .

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶

, , .

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

, , .

14031213800

FEC FORM 3Z (File with Form 3)
CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) MARK SULLIVAN FOR CONGRESS		Report Covering Period: From: 01/01/2014 To: 03/31/2014				
Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees			
A		13,909.83	2,000.00			
B	Column Total Last Page Only.....	21,159.47	4,000.00			
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A	0.00	0.00	16,909.83	0.00	0.00	0.00
B	0.00	9,465.98	35,625.45	0.00	2,500.00	0.00
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A	0.00	0.00	0.00	16,909.83	1,878.54	0.00
B	2,500.00	0.00	0.00	39,125.45	19,017.10	0.00
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A	0.00	1,000.00	1,000.00	0.00	0.00	0.00
B	0.00	1,000.00	1,000.00	0.00	0.00	0.00
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A	0.00	0.00	2,878.54	5329.01	19,360.30	0.00
B	0.00	0.00	20,017.10			
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A	0.00	16,909.83	1,878.54			
B	2,500.00	35,625.45	19,017.10			

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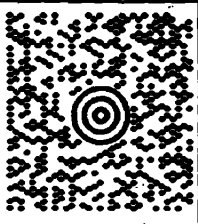
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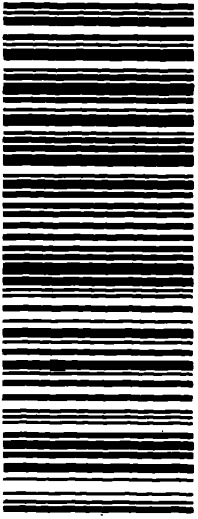
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